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TRANSMITTAL FORM		Application Number	09/858,40	3	
		Filing Date	05/16/200	1	
		First Named Inventor	Collings III	Collings III	
		Art Unit	2142	2142	
(to be used for all correspondence after initial filing)		Examiner Name	VU, Thong H		
Total Number of Pages in This Submission		Attorney Docket Number	M004.P001U1		
ENCLOSURES (Check all that apply)					
				After Allowance Communication	on to TC
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		Power of Attorney, Revocation Change of Correspondence Address		Status Letter	
	ffidavits/declaration(s)		Address	Other Enclosure(s) (please Ide	entify
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name Bockhop & Associates, LLC ,					
Signature Signature					
Printed name Bryan W. Bockhp					
Date 04/21/2005		Reg. No.		39,613	
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